

Instructions for Completing CDA 30

The Title V/SCSEP & OARR Request for Funds form (CDA 30) is designed for requesting monthly advance or reimbursement funds for the Title V/SCSEP and OARR programs. All requests for funds entered into the CDA 30 should be rounded to the nearest dollar.

HEADER SECTION:

Enter the following information:

- Planning and Service Area (PSA) number [assigned two digit contract extension]
Example (TV 2122-##)
 - Remit to Name and Address will auto-populate once the PSA # is entered
- Fiscal Year - State Fiscal Year
- Contract Number - Will auto-populate once the Fiscal Year and PSA # are entered
- Invoice Date - Date the report is being submitted

REQUEST FOR FUNDS:

Enter the month and year for which funds are being advanced or reimbursed. Select either Advance or Reimbursement basis, as determined at contract execution.

Enter Funds requested for Contractor Administration, Program Other and PWFB.

No PWFB will be funded for OARR FY2122.

Advance amounts must be based on estimated cash need for the period.

Reimbursement amounts must agree with the corresponding CDA 29 expenditure report.

FOR STATE USE ONLY:

This section is to be completed by CDA staff.

SUBMISSION DUE DATES:

The completed CDA 30 must be sent as an e-mail attachment to the [Fiscal Email Address: Finance@aging.ca.gov](mailto:Finance@aging.ca.gov). Signatures of the AAA director and staff are not required.

See contract language for due dates.

In your email subject line, please identify your PSA ##, Program, and Current Month Request for Funds being submitted (Example: PSA [34](#) TV [Sep](#) RFF FY22).

Once approved, you will receive a signed copy of the CDA 30, to include documentation reflecting any CDA adjustments, via email. Please adjust your records to reflect any CDA adjustments.